

# PART B—ISSUE FEE TRANSMITTAL

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS (Complete only if there is a change) <b>FROMMERS</b> <b>MORRIS &amp; SAFFORD</b> <b>NEW YORK, NY 10036</b>	2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change) <b>INVENTOR'S NAME</b> <b>SAEUREK, B</b> <b>City, State and ZIP Code</b> <b>130631 XGB</b> <b>INVENTOR'S NAME</b> <b>Street Address</b> <b>City, State and ZIP Code</b> <input type="checkbox"/> Check if additional changes are on reverse side
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SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/157,375	11/23/93	072	SAEUREK, B 2603	08/07/95
<b>First Named Applicant</b> <b>O'SULLIVAN, JOHN D.</b>				
<b>TITLE</b> <b>INVENTION: WIRELESS LAN</b>				

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPL. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2 457680201	370-094300	N99	UTILITY	NO	\$1210.00	11/07/95

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
	William S. Frommer, esq. 2 3

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type) (1) NAME OF ASSIGNEE Commonwealth Scientific and Industrial Research Organisation (2) ADDRESS: (CITY & STATE OR COUNTRY) Australia	6a. The following fees are enclosed: <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advance Order - # of Copies 10 6b. The following fees should be charged to: DEPOSIT ACCOUNT NUMBER (ENCLOSE PART C) <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies <input type="checkbox"/> Any Deficiencies in Enclosed Fees THE COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above. (Authorized Signature) <i>William Frommer</i> (Date) 10/24/9
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